

DONATION FORM



Supporting People with Ocular Melanoma

YOUR DETAILS

1

Name: _____ Telephone Number: _____

Address: _____ Email Address: _____

Are you: Already a member of OcuMel UK Interested in joining Not a member of OcuMel UK

Please complete one of the two boxes below & the Gift Aid Declaration if relevant

ONE-OFF DONATION

2

I wish to donate the sum of £ _____ to OcuMel UK (Reg Charity No. 1147506).

By Cheque Postal order CAF voucher (please tick as appropriate) made payable to 'OcuMel UK'

If this is a donation in memory, please give the name of the deceased and your relationship to them:

If this donation is the result of a fundraising activity you arranged, please tell us what you did:

MONTHLY STANDING ORDER

3

Please make payments and debit my / our account number: _____ Sort Code: _____

In accordance with the following details:

Pay CAF Bank Ltd, 25 Kings Hill Avenue, West Malling, Kent (40-52-40) for the account of OcuMel UK (ac/no 00022922) the sum of £ _____ per month until further notice,

Quoting ref: _____ (to be inserted by OcuMel UK)

Starting on: _____ (please leave at least one month from today)

Signed: _____ Date: _____

Name and Address of your Bank: _____
(including postcode)

GIFT AID DECLARATION

BOOST YOUR DONATION BY 25P OF GIFT AID FOR EVERY £1 YOU DONATE

4

Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer.

I want to Gift Aid the donation above and any donations I make in the future or have made in the past 4 years to OcuMel UK

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

Signed: _____ Date: _____

OTHER WAYS YOU COULD SUPPORT OCUMEL UK

5

■ Did you know you can also donate online at www.ocumeluk.org/donate or by text OMUK20 followed by a space and then £1.00, £2.00, £3.00, £5.00, £7.00 or £10.00 to 70070

Please tick relevant box:

- | | |
|--|---|
| <input type="checkbox"/> Organise an fundraising event in aid of OcuMel UK | <input type="checkbox"/> Volunteer for us or join our Trustee Board |
| <input type="checkbox"/> Sign up for annual Eye Patch Day to help raise awareness of ocular melanoma | <input type="checkbox"/> Leave a legacy to OcuMel UK in your will |
| | <input type="checkbox"/> Share some of your knowledge with us |



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